

**MID-AMERICA AEYC
CURRICULUM INSTITUTE
FEBRUARY 25 & 26, 2011**

Name of Presenter: _____
Title of Presentation: _____
Directors _____; **Institute** _____
Track: I/T, PS/PK, School Age, FCC, Admin, other

Call For Proposals

The Mid America Association for the Education of Young Children invites you to submit a presentation proposal for the *27th Annual 2011 Curriculum Institute* to be held at Overland Park Church of Christ, located at 13400 W 119th St., Overland Park, KS, 66213. This conference is expected to draw 400 participants from Kansas and Missouri who are professionals, students, and parents working with children from birth through age eight, in a variety of disciplines: family child care, early childhood, preschool, infant-toddler, after-school, kindergarten, special education, and teacher education.

We are planning to offer a wide variety of workshops based on the skills and competencies identified as important for Early Care and Education professionals. Workshop sessions should be formatted to provide an active learning experience for the participants, opportunities for participation, problem solving, questions and discussion. We are interested in providing a wide range of workshops in the following areas:

Topic Category– Please check the most appropriate category (1) for your presentation:

- | | | |
|---|--|---|
| <input type="checkbox"/> Accreditation | <input type="checkbox"/> Curriculum | <input type="checkbox"/> Music & Movement |
| <input type="checkbox"/> Advocacy/Public Policy | <input type="checkbox"/> Diversity/Equity/Culture | <input type="checkbox"/> Personal/Professional Dev. |
| <input type="checkbox"/> Anti-Violence | <input type="checkbox"/> Family Child Care | <input type="checkbox"/> Project Approach |
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Family Support | <input type="checkbox"/> Resource & Referral |
| <input type="checkbox"/> Brain Development | <input type="checkbox"/> Health/Safety | <input type="checkbox"/> Social/Emotional Issues |
| <input type="checkbox"/> Child Development | <input type="checkbox"/> Intergenerational | <input type="checkbox"/> Special Needs/Inclusion |
| <input type="checkbox"/> Collaboration | <input type="checkbox"/> Leadership/Administration | <input type="checkbox"/> Technology |

Presentations must reflect current trends and/or developmentally appropriate practice. All handouts are the responsibility of the presenter. Conference registration fees will be waived for 1 presenter and the second presenter will be half price. You may submit a proposal for the Directors Institute on Friday, and/or the Early Care and Education Institute on Saturday.

General information–please check appropriate answers:

- This proposal is for Directors Institute ; for the Early Care & Education Institute
- Workshop **length:** 1 ½ hours 3 hours
- I am willing to **repeat** yes no
- Some rooms have **technology**. (The following are available on a first-come, first-served basis):
 TV/VCR/DVD overhead white/chalk board (you will need to provide markers/chalk)

Proposals must be received by Friday, October 1, 2010. Notification of proposal acceptance will be **by Friday, December 3, 2010.**

Proposal Format: (Proposal format is based on KS in-service approval forms.)

- Fill out pages 1-4 of the Call for Proposals completely.
- Submit enclosures required on page 3.
- Make three copies. Please staple together. (Remember to save a copy for yourself!)

Please share this “Call for Proposals” with others who may be interested in presenting at this Institute.

If you have questions about the form contact Mary Thibault 913-469-8500 x 3551 mthibaul@jccc.edu

Kansas Department of Health and Environment
 Bureau of Child Care and Health Facilities
 1000 SW Jackson, Suite 200
 Topeka, KS 66612-1274
 Phone: 785-296-1270 Fax: 765-296-0803
 Website: www.kdhe.state.ks.us/kidsnet

REQUEST FOR IN-SERVICE TRAINING APPROVAL FOR CLOCK HOURS

To obtain clock hour approval, complete all information on this form, including required attachments, at least three months prior to the scheduled training date. Applications that are submitted with less time prior to the training date are not guaranteed to receive approval prior to the training date. Complete a separate application for each learning activity. Do not submit requests for training that has been approved for Early Childhood CEUs. Please print or type all information. Incomplete applications will be returned.

Sponsoring Agency/Organization Information

Mid-America AEYC
 Name of sponsoring agency
913-469-8500 x 3551
 Telephone

P.O Box 30443
 Address of sponsoring agency
Kansas City, MO 64112 Jackson
 City State Zip County

Mary Thibault
 Contact Person

mthibaul@jccc.edu
 E-mail

Instructor/Trainer Information

 Instructor: First & last Name

 Current Employer

 Job Title

 Address

 City State Zip Code

 Telephone Fax

 E-mail

 Degree/Certificate/Credential (if any)

 Professional experience relevant to topic

Trainer is registered with OPEN __yes __no

 Instructor: First & last Name

 Current Employer

 Job Title

 Address

 City State Zip Code

 Telephone Fax

 E-mail

 Degree/Certificate/Credential (if any)

 Professional experience relevant to topic

Trainer is registered with OPEN __yes __no

Learning Activity/Training Information

Title of the learning/training _____

Scheduled date(s) February 25 & 26, 2011

Scheduled location(s) Mid America AEYC Curriculum Institute

Total hours of instruction _____ 1 ½ hours _____ 3 hours

Has this training been presented before? _____ Yes _____ No

If so when: (month, day, year) _____ **KDHE approval #** _____

Where? _____

Who did the instruction/training? _____

Specify the target audience (check all that apply):

_____ licensed day care home/group day care home/registered family day care home provider

_____ center based teaching staff

_____ infant

_____ toddler

_____ preschool

_____ center based administration/program director

_____ licensing surveyor/regulatory staff

_____ other:

_____ school age

Please check one content area relating to the primary objective of the learning activity using the *Core Competencies for Early Care and Education Professional in Kansas and Missouri*.

_____ Child Growth & Development

_____ Learning Environment and Curriculum

_____ Child Observation and Assessment

_____ Families and Communities

_____ Health, Safety, and Nutrition

_____ Interactions with Children

_____ Program Planning and Development

_____ Professional Development

_____ Leadership

Check the CDA Subject Area(s) that apply:

_____ I. Safe, Healthy Learning Environment

_____ V. Program Management

_____ II. Physical & Intellectual Competence

_____ VI. Professionalism

_____ III. Social & Emotional Development

_____ VII. Observing & Recording Behavior

_____ IV. Relationships with Families

_____ VIII. Child Growth & Development

Check the Knowledge or Skill level of the Target Audience:

_____ Level 1 skills or knowledge expected of an early care and education professional new to the childcare field, with minimal specialized education and training

_____ Level 2 includes level 1 plus skills or knowledge commensurate with CDA credential in Child Development or equivalent education or training

_____ Level 3 includes level 1 and 2 plus skill or knowledge commensurate with an associate's degree in early childhood or child development.

_____ Level 4 includes levels 1,2,and 3 plus skills or knowledge commensurate with a bachelor's degree in early childhood or child development.

_____ Level 5 includes levels 1,2,3,and 4 plus skills or knowledge commensurate with an advanced degree in early childhood or child development, understanding that at this level early care and education professionals are increasingly specialized.

Enclosures to Include:

1. Submit a copy of the complete description of the learning activity/training that includes:
 - a. A brief description of the learning objectives
 - b. An overview description of the content to be included
 - c. Materials to be used
 - d. Training methods (i.e. demonstration, small-group discussion, role-playing, panel, lecture, etc.)
2. Submit an overview of 30 words or less to appear in the conference program
3. Please include any additional information including special considerations that will assist Child Care Licensing and Registration staff in determining that the minimum requirements for clock hours approval have been met.
4. Submit a copy of the evaluation form to be used. (MA-AEYC will submit.)

Assurances:

- 1) As the sponsor and/or the **trainer** of the learning activity/training, I am responsible for the quality of the learning activity/training, qualifications of the instructors/trainers, supervision and documentation of the content and clock hour certificates for learners.
- 2) As the sponsor and/or the **trainer** of the learning activity/training, I understand that the training content must not be in conflict with Kansas child care statutes and regulations.
- 3) As the sponsor and/or the **trainer** of the learning activity/training, I will allow the Kansas Department of Health and Environment, Child Care Licensing and Registration access to my documentation of approved learning activities.
- 4) As the sponsor and/or the **trainer** of the learning activity/training, I will not advertise that learning activities are approved by KDHE prior to obtaining written approval. I may advertise that approval has been requested.
- 5) As the sponsor *and/or* the **trainer** of the learning activity/training, I will be responsible for assuring that Certificates of Completion documenting attendance will not be issued to learners who have not completed the learning activity/training. Certificates are not to be awarded for partial attendance.

Signature of Authorized Representative from the Sponsoring Agency (MA-AEYC) Date

Signature of Instructor/Trainer Date

Submit 3 copies of Proposal by October 1, 2010 to:
Mid America AEYC Institute Committee
c/o Mary Thibault Box 15
Johnson County Community College
12345 College Blvd
Overland Park, KS 66210